

Martha G. Bronitsky
Chapter 13 Standing Trustee
United States Bankruptcy Court

22320 Foothill Blvd #150, Hayward , CA 94541
Mail to: P.O. Box 5004, Hayward, CA 94540-5004
Debtor Chapter 13 Plan Payments to: P.O. Box 88007, Chicago, IL 60680-1007
Telephone: (510) 266-5580
Fax: (510) 266-5589

June 20, 2016

Nathan D Borris Atty
1380 A Street
Hayward, CA 94541

Chapter 13 Case No.: 16-41503-CN 13
Re: Refugio Flotte

In our initial review of your client's case, the trustee requests clarification of the listed items on the attached forms.

Although a complete review of this case has not taken place and there may be other inconsistencies that may need to be addressed at the 341 meeting, it is necessary to advise you of the situation.

The requested items **must** be received five (5) days prior to the 341 meeting of creditors. Failure to provide the requested information may result in the recommendation by the trustee that this case be dismissed or converted to a Chapter 7.

If you have any question concerning this matter, please do not hesitate to contact the Legal Department.

Sincerely,

/s/ Martha G. Bronitsky
Martha G. Bronitsky
Chapter 13 Standing Trustee

CASE # 1641503 FLOTTE

BASED ON THE INITIAL REVIEW OF THE ABOVE DEBTORS CASE THE FOLLWING AMENDED PLAN, SCHEDULES AND/OR MISC DOCUMENTS **NEED TO BE FILED WITH BANKRUPTCY COURT** FOR THE FOLLOWING REASONS:

DEBTOR'S PLAN

- ☐ Standard Oakland Division Chapter 13 plan to be filed with court. (Version 8/1/13 – see attached)
- ☐ Please serve the plan on all creditors with 28 days' notice and opportunity to object on all creditors or 21 days' notice and opportunity to object, if plan was previously served and amendment is being filed that effects the creditors.
[Attached is a standard notice and certificate of service. Please include your creditors in the certificate of service and mail a copy of the notice, certificate of service and the plan to each creditor and file the notice and certificate of service with the bankruptcy court]
- ☒ SEC 1.01A MISSING LANG: (describe, such as wages, rental income, etc.): _____ Debtor shall after _____ months, pay _____ per month for _____ months
- ☒ Section 1.01c missing plan term and/or term does not match 1.01a
- ☐ Section 2.03 (Attorney fees):
_____ Missing:
_____ Fees are inconsistent with the amounts reflected on the Fee disclosure and/or the rights and responsibilities form
- ☐ Section 2.10 missing priority creditors from schedule E/F
- ☐ Section 2.12
_____ Percent plan or Pot Plan must be selected
_____ Estimated percentage must be reflected under "Pot Plan"
- ☐ The following creditor(s) treatment unfairly discriminates other unsecured creditors:
Section: _____ Creditor: _____
- ☐ No time frame for sale/refinance of property and/or time frame too long in section 1.01(b). (Timeframe should not exceed 12 months)
- ☐ Per Trustee's plan calculations;
_____ Plan exceeds sixty (60)/thirty six (36) months, Needs \$ _____
_____ Monthly payments on attorney fees too high
_____ Monthly payments on attorney's fees & arrears overlap.
_____ No monthly payment provided for

___ Pre/Post confirmation fixed payments exceed actual payments proposed. (These are payments that Trustee is to disburse to creditor(s) on a monthly basis, so they must be less than the proposed plan payment).

___ Debtors plan fails to meet the chapter 7 liquidation analysis

- ☐ Information on the plan, does not match/needs clarification:
___ Creditor is listed in multiple sections, must select one.
- ☐ Claim #___ filed by ___ - not provided for and/or classification of claim is different than scheduled and/or filed for higher than scheduled.
- ☐ Section 2.05 – “reduction in value” requires Motion to value Collateral to be filed and ordered prior to confirmation of plan - Please serve with 28 days’ notice and opportunity to object.
Needed for the following creditors: _____

MISC DOCUMENTS

- ☐ Copy of most recent filed IRS tax return to trustee’s office 7 days before 341.
Send 1st two pages of 1040 & schedule C (if applies) with all SSN’s redacted including dependents’ names and SSN’s (if applies).
- ☐ Payment advices/paystubs (60 days prior to filing) to be provided to trustee’s office 7 days before 341. If debtor does not receive payment advices/paystubs, Payment Advice Coversheet should be provided with corresponding box selected.

NOTE: PLEASE DO NOT FILE TAXES OR PAYMENT ADVICES WITH COURT.

THEY ARE TO BE SENT IN THE FOLLOWING FORMATS:

- Via mail - Po Box 5004 Hayward Ca 94540
 - Drop off – 22320 Foothill Blvd #150 Hayward Ca 94541
 - FTP site
 - Encrypted file via email 13TRUSTEE@OAK13.COM only if properly encrypted, with the proper access information provided to the Trustee’s office. Taxes and payment advices must be attached as separate PDF attachments. If the email is not encrypted they will not be received.
- ☐ Certificate of credit counseling and/or declaration of exigent circumstances re: credit counseling to be filed.
 - ☐ Statement by debtor not represented by an attorney to be provided (see attached)

MEANS TEST (Form 122C-1/ Form 122c-2)

- ☐ Payment of \$ with % to unsecured creditors is needed to pay in disposable monthly income of \$

- ☐ Per means test, commitment period of 60 months is needed for plan.
- ☐ Business expenses need to be moved from form 122C-1, line 5 to form 122C-2, line 43.
- ☐ Deduction on # needs a supporting declaration.
- ☐ Deduction on # does not match the current expenses of the debtor, per the schedule J.
- ☐ Incorrect information on means test Line#
- ☐ Declaration is necessary to explain the difference between the Means Test Income of \$_____ and the Schedule I income of \$_____.

SCHEDULES:

- ☐ **Voluntary Petition (Form 101):** Part __ # ____:
- ☐ **Summary of Your Assets/ Liabilities/ Certain Statistical information (Form 106Sum):** Part __ # ____:
- ☐ **Schedules A/B (Form 106A/B):** Part __ # ____:
- ☐ **Schedule C (Form 106C):**
Part __ # ____:
- ☐ **Schedule D – Secured Creditors (Form 106D):** Part __ # ____:
- ☐ **Schedule E/F- Unsecured creditors (Form 106E/F):** Part __ # ____:
_____ must reflect domestic support obligation information for the holder of the claim.
(Only if there is a court ordered for the support)
- ☐ **Schedule G – Executory Contracts (Form 106G):** Part __ # ____:
- ☐ **Schedule H – Co-Debtors (Form 106H):** Part __ # ____:
- ☒ **Schedule I – Income (Form 106I):**
__XX__ Declaration of outside party to support plan to be filed re: FAMILY ASSISTANCE
\$700
- ☐ **Schedule J - Expenses**
☐ **(Form 106J):**

___ Part __ # ___:
___ Expenses exceed Income
___ Proposed payment exceeds excess income
___ Auto insurance not provided for
___ Not all excess income is being paid into the plan \$___ after expenses &
proposed \$___ plan payment

☐ (**Form 106J-2**): Part __ # ___:

☐ **Statement of Financial Affairs (Form 107):**

___ Information incomplete Part __ # ___:
___ Part __ # ___ Missing

ATTORNEY FEES

- ☐ Rights and Responsibilities form is not filed and/or on incorrect form [Form was updated 8/1/15 to include provision for MMM fees]
☐ Attorney fee disclosure form is not filed and/or on incorrect form
Note: fees will not be paid unless above forms are filed on the correct form

MORTGAGE MODIFICATION MEDIATION (MMM):

☒ Motion for referral of case to the MMM program needs to be filed and ordered

OTHER:

☐ Motion to dismiss:

☐

*****Note: If you have questions regarding the above information, please contact the Trustee's office by phone (510) 266-5580 or send an email:**

RLE - Susie Valdivia at svaldivia@oak13.com

CN - Rammet Munoz at rmunoz@oak13.com

WJL - Veronica Valdez at vvaldez@oak13.com